

**U.S. UTILITY Patent Application**

**PATENT DATE**

SCANNED

**Q.A.**

CK

APPLICATION NO. 09/634087	CONT/PRIOR	CLASS <del>433</del> 15	SUBCLASS 110	ART UNIT <del>3792</del> 1744	EXAMINER SPISICH
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## APPLICANTS

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### Oral care devices

# TITLE

PTO-2040  
12/89

**ISSUING CLASSIFICATION**

ORIGINAL						CROSS REFERENCE(S)						
CLASS			SUBCLASS			CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)					
<b>INTERNATIONAL CLASSIFICATION</b>												

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	<b>Sheets Drwg.</b>	<b>Figs. Drwg.</b>	<b>Print Fig.</b>	<b>Total Claims</b>
<input type="checkbox"/> The term of this patent subsequent to _____ (date) has been disclaimed.  <input type="checkbox"/> The term of this patent shall not extend beyond the expiration date of U.S Patent. No. _____ _____ _____			<b>NOTICE OF ALLOWANCE MAILED</b>	
	(Assistant Examiner) (Date)			
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<input type="checkbox"/> The terminal ____months of this patent have been disclaimed.			<b>ISSUE BATCH NUMBER</b>	
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